
Impact of Financial Incentives on Nutritional Status of the Adolescent Girls in West Bengal

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Abstract

India contributes a substantial number to the global population. United Nations-led 'sustainable development goals, 2030 to address the seventeen major globally recognised concerns for a better world for mankind, relies largely on the performance of India. But the malnutrition of the younger population of India is the major bottleneck for achieving the sustainable development goals, of 2030. Several nutrition-specific and sensitive intervention strategies have been introduced to mitigate the challenges. In the era of globalization, and digitization personalized and informed intervention strategies like financial incentives are pivotal. West Bengal, one of the populous states of eastern India has introduced several financial incentives for the younger population of the state. However, the objectives of the financial incentives were to address the early marriage and school dropout-related issues of adolescent girls in the state. In this study, it has been observed that financial incentive is not only useful to address social issues but also has a substantial impact on the nutritional status of adolescent girls in West Bengal.

KEYWORDS: Malnutrition, anaemia, financial incentives, West Bengal

INTRODUCTION

India is the seventh largest nation in the world. India contributes 17.7% of the world's population (Kumari et al., 2019). India is the fifth largest economy in the world (Basu & Maertens, 2007). Thus, the success of the United Nations (UN) driven sustainable development goals in 2030 significantly relies on the performance of India (NITI AYOJ, 2022). The UN has set up seventeen significant parameters. The success of the different parameters largely relies on the country's nutritional status. Considering the circumstances, the government of India (GoI) has developed national nutrition strategies. The primary task of the national nutrition strategies or national nutrition mission is to screen out the nutritional status of the population at regular intervals of time. Even settling the data-driven national and regional intervention strategies is the

priority. The Indian population is relatively young compared to the rest of the world. Thus, the young nation can become a global leader in various development goals. India has the third largest ecosystem for startups, where eighty startup projects are initiated daily. In this era of globalization, skilled and motivated youth is the crucial regulator of the nation's progress. However, the different survey reports on nutrition are alarming. Thus, the dichotomy of India's developmental status raised serious concerns. The growing economic inequality in society is declining the nutritional status of a more significant segment of the nation's youth. This havoc number of youth with compromised health and nutritional status will reduce India's chances to fetch out the maximum demographic dividend from the nation's younger generation. Anaemia is a public health nutrition concern in India and the world (Basu & Maertens, 2007). The studies suggested that anaemia reduces cognitive ability and work capacity. Thus, anaemia's impact is deeply rooted and often leads to an intergenerational cycle of malnutrition. Surprisingly the most vulnerable groups that suffer from anaemia are children under five years of age, and women of reproductive age comprise the adolescent groups, respectively. Therefore, the intervention strategies must focus on vulnerable groups. Several studies reported that the early stage of nutrition-specific intervention strategies helps mitigate nutritional anaemia for children under five years of age.

Nevertheless, addressing the anaemia-related challenges among adolescent girls and women of reproductive age is difficult. Since the impact of the nutritional status of the latter group not only depends upon the nutritional intake but also depends on the various social and economic statuses of the individuals. Thus, the importance of the nutrition-sensitive intervention programme was found effective in mitigating the challenges more holistically. Financial incentives are a globally appreciated nutrition-sensitive programme, which has a crucial impact on promoting nutrition. Gol has introduced the 'Janani suraksha yojana' and 'Rajiv Gandhi kishori sashaktikaran yojana' to address nutrition-related issues. Interestingly, West Bengal, one of the populous states of eastern India, 2013 launched financial incentives for adolescent girls to reduce early child marriage and school dropout (Dutta & Sen, 2020). The present study attempts to understand the impact of financial incentive schemes on improving the nutritional status of adolescent girls in West Bengal.

STATE OF MALNUTRITION IN INDIA:

Malnutrition is a major public health concern in the world as well as in India. Malnutrition is one of the major bottlenecks for a country's sustainable growth and development. Malnutrition hinders economic prospects in multiple ways. The major concern is about disability-adjusted life years (DALY), which represents the loss of years in life due to disability or illness. The burden of DALY in India is insurmountable.

The rise of DALY is negatively associated with the country's growth. The health impairment of the individual reduces work output thus hindering the financial prosperity of the nation. An active and healthy individual could reverse the situation. Thus, the possibility to overcome this condition relies largely on specific nutritional intervention programmes. Every intervention strategy largely depends upon the primary data. The Government of India (GOI) is concerned about the burden of malnutrition in India. Therefore, various agencies like; National Nutrition Monitoring Bureau (NNMB), District level household survey (DLHS), and National Family & Health Survey-(NFHS) conducts surveys at regular interval of time to sensitize the population about the severity of the condition. The primary data of the major surveys revealed that the most vulnerable populations are children and women of reproductive age. NFHS-5 data indicates that the prevalence of major determinants of the nutritional indicators like; Children under 5 years who are stunted (height-for-age), Children under 5 years who are severely wasted (weight-for-height), Children under 5 years who are wasted (weight-for-height), Children under 5 years who are underweight (weight-for-age) are 35.5%, 19.3%, 7.7%, 32.1% respectively. The nutritional status of the women of reproductive age (15-49 years) shows that the prevalence of anaemia (<12.0g/dl) among the non-pregnant women aged 15-49 years, pregnant women age 15-49 years, all women age 15-19 years are 57.2%, 52.2%, 59.1% respectively. Thus, the major nutritional interventions emphasize scaling up the nutritional status of adolescent girls to develop a healthy nation (Ministry of Health and Family Welfare India Fact Sheet, 2019).

STATE OF MALNUTRITION IN WEST BENGAL:

West Bengal with its 91 million population is the key regulator of national growth and progress. Eastern India's economical hub West Bengal comprises a huge number of rivers and water lands which makes the land of the state fertile and diversified. The wide variety of both the 'Rabi' and 'Kharif' crops produces in the state. The state produces an ample amount of rice and a significant amount of green leafy vegetables. But the state's economic progress largely depends on agriculture and small to medium-sized enterprises. The eastern part of the nation suffered a long colonial deprivation as well as the lack of large-scale industries induces poverty. Poverty perpetuates the deprivation of nutrition. The NFHS-5 data indicates the nutritional status of the state has shown an improvement, but the development is sluggish. The data shows that the prevalence of children under 5 years who are stunted (height-for-age), wasted (weight-for-height), severely wasted (weight-for-height), and underweight (weight-for-age) is 33.8%, 20.3%, 7.1% and 32.2% respectively. Another vulnerable group is women of reproductive age and their status in West Bengal has been revealed in NFHS-5 data sets, where the prevalence rate of anaemia among non-

pregnant women aged 15-49 years who are anaemic, pregnant women aged 15-49 years who are anaemic, all women aged 15-49 years who are anaemic and all women aged 15-19 years who are anaemic are 71.7%, 62.3%, 71.4% and 70.8% respectively. West Bengal is considered as culturally enriched and skilled human resources (Ministry of Health and Family Welfare State Fact Sheet West Bengal, 2019). Thus, the nutritional impairments of the state will have a direct impact on the growth of the nation. In this context, the Government of West Bengal initiated several welfare schemes to promote the health and nutritional status of individuals, especially among vulnerable groups. Among the many welfare schemes the financial incentive schemes like 'kanyashree' is undoubtedly the most popular one. The various aspects of this popular scheme need to be analysed (Sen, 2018).

FINANCIAL INCENTIVES IN PROMOTION OF NUTRITION:

Financial incentives are operational in both developing and developed nations. The impact of financial incentives among large-scale enterprises is well recognized (Harnack et al., 2016). In the era of globalization, the implementation of several financial incentives as a tool to alleviate poverty, health and nutritional status is getting popularised across the globe. The six different types of financial incentives are commonly used in policy framing. The details of the different financial incentives are as follows.

Unconditional Cash Transfer: Monetary transfers to households or individuals without pre-imposed conditionalities.

Conditional Cash Transfer: Monetary transfers to households or individual's conditional on the recipient adopting and maintaining certain behaviours prescribed by the cash transfer program.

Unconditional Microcredit: Small loans offered to borrowers (usually lacking employment or credit history) without imposing conditionalities other than re-payment of the loaned amount.

Conditional Microcredit: Small loans offered to borrowers (usually lacking employment or credit history) conditional on the recipient adopting and maintaining certain behaviours prescribed by the program in addition to re-payment of the loaned amount.

Unconditional Voucher: Indirect monetary transfer given by issue of coupons, vouchers, electronic card transfer, or other methods used to purchase commodities from local shops or outlets.

Conditional Voucher: Indirect monetary transfer given by issue of coupons, vouchers, electronic card transfer, or other methods used to purchase commodities from local

shops or outlets conditional on the recipient adopting and maintaining certain behaviours prescribed by the voucher program.

User Fee Removal: Total or nearly total (75% or more) removal of user fees for accessing health services.

The observation made by the Nugent et al. explains the importance of financial incentives in the promotion of fruit and vegetable consumption of the united states (Nugent et al., 2021). Even similar studies reported that financial incentives often promote better dietary behaviour in the target groups. Globally financial incentive schemes for promotion and scaling up health and nutritional status are becoming hugely popular among policy makers (Verghese et al., 2019). The schemes give the target group more choices. Personalised preferences are getting considered while implementing schemes in comparison to mass intervention programmes (Bassani et al., 2013).

STATE OF FINANCIAL INCENTIVES IN PROMOTION OF NUTRITION IN WEST BENGAL:

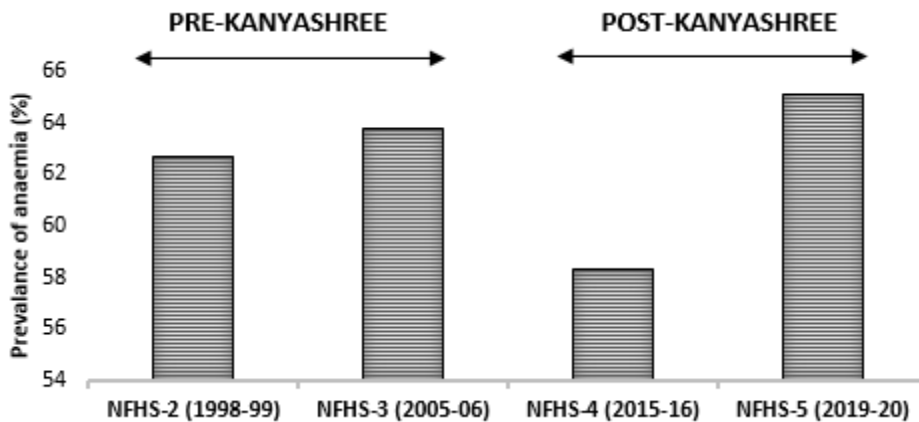


Figure 1. Prevalence of anaemia of adolescent girls

'kanyashree prakalpa' was initiated in 2013 by the Government of West Bengal. The flagship scheme was aimed to reduce early child marriage and adolescent school dropout, especially for girls. The 'kanyashree prakalpa' is a conditional cash transfer scheme where the first component consists of an annual grant of Rs 750 for unmarried girls between 13 -18 who are enrolled in grades VIII – XIII or equivalent in some educational institution (KP1). The second component is a one-time grant of Rs 25,000 upon the attainment of 18 years, conditional upon her remaining both unmarried and pursuing 2 education/ vocational training/ technical training/ sports training till that age (KP2) (Ghara & Roy, 2017). The immensely popular and impactful scheme is useful in reducing school dropout rates as well as in the reduction of child marriage. Several

studies reported that the scheme has the potential to promote better employability. However, the impact of the scheme on the nutritional status of the individual to our best knowledge was never investigated. In the available National Family and Health Survey (NFHS) data, it has been observed that anaemia is one of the components among all the major nutritional parameters that have been recorded since the inception of NFHS. Interestingly, the initial years of 'kanyashree prakalpa' showed a substantial reduction in the prevalence of anaemia among adolescent girls. But the sudden increase in the anaemia prevalence rates advocates for detailed empirical research (Figure 1.).

CONCLUSION:

Adolescent girls represent the future leader of the nation. These girls will be the major caregiver of the future generation. The nutritional status of adolescent girls is crucial for the overall growth and development of the nation. India is a young nation where sixty percent of its population is youth. The health and nutritional status of these youth are crucial for achieving the maximum demographic dividends. Therefore, the status of the nutrition of every youth in this nation matters. The NFHS data are an excellent source of screening the problem among the youth. Every careful screening desire for a holistic nutritional intervention approach. The new intervention strategies nowadays give priority to individual differences, which was usually remained neglected in large-scale intervention programmes. The new tool to strengthen the intervention strategies is financial incentives. Conditional Cash Transfer is considered one of the major types of financial incentive programmes in promoting nutritional status. In West Bengal 'kanyashree prakalpa' is one of the socially impactful financial incentive programmes. However, the 'kanyashree prakalpa' showed an early trend in reducing the anaemia prevalence among adolescent girls. However, the long-term impact in nutritional parameters is not that significant compared to its effectiveness on the reformation of various social phenomena.

Interestingly, several studies reported that 'kanyashree prakalpa' has given the courage to marginalised adolescent girls to take up bigger responsibilities, especially in rural West Bengal. Thus, the positive attitude throughout the academic and personal life of the 'kanyashree' beneficiaries imparts a great impact on the social and economic upliftment of the state and the nation.

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